

Substitute for form 1449/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT (use as many sheets as necessary)				Complete if Known	
Sheet		1	of	1	Attorney Docket Number
					BTB-002

U.S. PATENT DOCUMENTS

Examiner Initials*	Cite No.	U.S. Patent Document		Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document MM-DD-YYYY	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number (If Known)	Kind Code (If Known)			
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	B1							

OTHER — NON PATENT LITERATURE DOCUMENTS

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Examiner Signature		Date Considered	
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<p>Substitute for form 1449/PTO</p> <p>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</p> <p>(use as many sheets as necessary)</p> <p><i>MAR 11 2005</i></p> <p>Patent & TRADEMARK OFFICE</p>				Complete if Known	
				Application Number	10/723,358
				Filing Date	November 26, 2003
				First Named Inventor	Bill T. Brazil
				Group Art Unit	3723
				Examiner Name	David B. Thomas
				Attorney Docket Number	BTB-002

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<i>DT</i>	1.	6,397,706	B1	Peter J. Maznicki	06-04-2002	

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	3.							

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